



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application No.	09/501,796
Filing Date	February 8, 2000
First Named Inventor	Norm D. Schlaegel
Examiner Name	DABNEY, Phylesha L.
Group Art Unit	2643
Total Number of Pages in This Submission	15
Attorney Docket No.	A-68724/AJT (465425-8)

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Amendment Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Response to Restriction Requirement (12pgs.)	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Check in the amount of \$685.00 for Issue Fee and \$685.00 for Petition Fee; Formal Drawings – Figs. 1-4 (2 sheets); and a Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<b>RECEIVED</b>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____	NOV 10 2004
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	<b>OFFICE OF PETITIONS</b>
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Aldo J. Test, Reg. No. 18,048 DORSEY & WHITNEY LLP 4 Embarcadero Center, Suite 3400 San Francisco, CA 94111 Telephone : 650-494-8700	Customer Number 32940
Signature		
Date	November 3, 2004	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

11/03/04

Typed or printed name	Lori Cox		
Signature		Date	November 3, 2004